Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

CLAIMS AS FILED - PART I												
	-	CLAIMS A						SMALL ENTITY			OTHER	THAN
T-0-7-1 - 01 - 01 - 01 - 01 - 01 - 01 - 0			(Column	ነ 1)	(Colu	(Column 2)		TYPE [<u> </u>	OR	SMALL ENTITY	
TOTAL CLAIMS			1			·		RATE	FEE].	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			mir	nus 20=	*	•		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			, minus 3 = *					X43=		OR	X86=	-
Мι	JLTIPLE DEPE	NDENT CLAIM P	RESÈNT					+145=		1	+290=	
* If the difference in column 1 is less than zero, enter "0" in column						column 2		TOTAL		OR		(אברי
CLAIMS AS AMENDED - PART II								IOIAL	L	OR	TOTAL OTHER	שרא
		(Column 1)	(Column 2)			(Column 3)	SMALL ENTITY			OR	SMALL E	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus			=		X43=		OR	X86=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
							Ĺ	TOTAL		{	TOTAL	
								ADDIT. FEE		OR ,	ADDIT. FEE	
	•	(Column 1)	·									
AMENDMENT B		REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	· FEE
	Independent	*	Minus	***		=		X43= ·	·	lł	X86=	···
~	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						▎▐	7.10-		OR		.,
								+145=		OR	+290=	
		•					· .	TOTAL DDIT. FEE		OR ,	TOTAL ODIT. FEE	
		(Column 3)			•		•					
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	4:4		=		X\$ 9=		OR'	X\$18=	
	Independent		Minus	***		= .	十	X43=		∴┟	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							7		OR	,,,,,,	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	
H	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter *20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter *3."									OR A	TOTAL DDIT. FEE	
1	he *Highest Num	ber Previously Paid	IN FOR IN THIS For" (Total or	o space is i Independen	ess thar t) is the	i 3, enter "3:" highest number		ODIT. FEE L d in the app	ropriate box		•	